

## **Supplemental Application Data Sheet**

### **Application Information**

Application number::	10/693,228
Filing Date::	10/24/03
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	2176
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	GROUP SHARED SPACES
Attorney Docket Number::	<del>224557</del> <u>30835/306083</u>
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets	20
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael
Family Name::	Shappell
City of Residence::	Issaquah,
Street of mailing address::	4352 243rd Ave SE
City of mailing address::	Issaquah
State or Province of mailing address::	WA
Postal or Zip Code of mailing address::	98029

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Ravi  
Middle Name:: T.  
Family Name:: Rao  
City of Residence:: Redmond  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 6051 137th Ave NE, #331  
City of mailing address:: Redmond  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98052

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: L.  
Family Name:: Miller  
City of Residence:: Woodinville  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 13433 NE 146th St.  
City of mailing address:: Woodinville  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98072

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Scott

Middle Name:: A.  
Family Name:: Senkeresty  
City of Residence:: Duvall  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 15717 278th Ave. NE  
City of mailing address:: Duvall  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98019

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Brian  
Middle Name:: R.  
Family Name:: Lieuallen  
City of Residence:: Redmond  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 7825 135th Avenue N.E.  
City of mailing address:: Redmond  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98052

### **Correspondence Information**

Correspondence Customer Number:: ~~38887~~ 45373

### **Representative Information**

Representative Customer Number:: ~~38887~~ 45373

### **Domestic Priority Information**

## **Foreign Priority Information**

## **Assignee Information**